Application No. Applicant(s) 10/539.077 ERNSTEN ET AL. Interview Summary Examiner Art Unit DAVID J. PARSLEY 3643 All participants (applicant, applicant's representative, PTO personnel): (1) DAVID J. PARSLEY. (3) (2) Bob Goozner. (4)____. Date of Interview: 14 February 2008. Type: a) ☐ Telephonic b) ☐ Video Conference c) Personal (copy given to: 1) applicant 2) applicant's representative Exhibit shown or demonstration conducted: d)☐ Yes e)XI No. If Yes, brief description: ____ Claim(s) discussed: 23 and 32. Identification of prior art discussed: Hudson US 1447553. Agreement with respect to the claims f) was reached. g) was not reached. h) N/A. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Discussed adding the limitations of the upper region of the conveyor being located between the vessel and the upper part of the trawl and the injector being substantially spaced from the trawl into the indpendent claims to overcome the 35 U.S.C. 102(b) rejections to Hudson. A further search and/or consideration may be needed to determine the patentability of these amended claims. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

/David J Parsley/
Primary Examiner, Art Unit 3643
Examiner's signature, if required

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

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